Application or Docket Number

PATENT APPLICATION FEE	DETERMINATION RECORD
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Effective October 1, 2001

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN															
		OLAIMO AC	(Column			olumn 2) TYPE				OR	OTHER THAN R SMALL ENTITY				
TOTAL CLAIMS								RATE	FEE		RATE	FEE			
FOI	3		NUMBER F	ILED	NUMBER EXTRA			ASIC FEE	370.00	OR	BASIC FEE	740.00			
то	TAL CHARGEA	BLE CLAIMS	min	us 20=	*			X\$ 9=		OR	X\$18=				
IND	EPENDENT CL	AIMS	mir	nus 3 =	*			X42=		OR	X84=				
MU	TIPLE DEPEN	DENT CLAIM PI	RESENT					+140=		OR	+280=				
* If	the difference	in column 1 is	s less than zero, enter "0" in column 2					TOTAL		OR	TOTAL				
CLAIMS AS AMENDED - PART II OTHER T												THAN			
	- 2000	(Column 1)		(Colu		(Column 3)		SMALL E	NTITY	OR	SMALL	ENTITY			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
NDM	Total	· 47	Minus	** 2	0	= 27		X\$ 9=		OR	X\$18=	486			
AME	Independent	* 3	Minus	***	3	= D	ļΓ	X42=		OR	X84=	~			
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	TCLAIM		」	+140=,		OR	+280=	<u>-</u>			
							L	TOTAL			TOTAL	MAR			
		i		10.1	۵۱	(0.1		ODIT. FEE		OR	ADDIT. FEE	1226			
	*	(Column 1) CLAIMS			mn 2) HEST	(Column 3)	1 г		ADDI-			ADDI-			
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE			
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=				
AME	Independent	*	Minus	***	T OL ALIA	=	4 [X42=		OR	X84=				
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	I CLAIM		」	+140=		OR	+280=				
A	•						L	TOTAL		OR	TOTAL ADDIT. FEE				
1		(Column 1)		(Colu	mn 2)	(Column 3)		DDIT. FEE			ADDII. PEE				
AMENDMENT &		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER OUSLY FOR,	PRESENT EXTRA][RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
N Q N	Total	* 47	Minus	** /	24	=	$+\Gamma$	X\$ 9=		OR	X\$18=				
AME	Independent	* 3	Minus	***	7	=	+1	X42=		OR	X84=				
ال	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	I CLAIM		」	+140=		OR	+280=				
		mn 1 is less than t					L	TOTAL		OR	TOTAL				
***	If the "Highest Nu	mber Previously F Imber Previously F	Paid For" IN TH	IS SPACE	is less that	an 3, enter "3."	,	DDIT. FEE			ADDIT. FEE				
	The "Highest Nun	nber Previously Pa	aid For" (Total o	r Indepen	The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										

Application or Docket Number											ber				
	PATENT APPLICATION FEE DETERMINATION RECORD Effective November 10, 1998														
		S FILED Column 1)	•	SMALL ENTITY TYPE			OR	OTHER THAN							
FOR NUMBER FILED NUMBER EXT						EXTRA		RAT	E	FEE		RATE	FEE]	
BASIC FEE										380.00	OR	841.	760.00	ł	
TOTAL CLAIMS // minus 20= • XC						X\$:	9=		OR	X\$18=	360				
INDEPENDENT CLAIMS 3 = 1						X 39)=		OR	X78=					
ML	ILTIPLE DEPEN	NDENT (CLAIM PI	RESENT					+130) -		1	+260=		1
* (f	the difference	in colu	mn 1 is	less than :	zero e	enter "0" in c	column 2	١				OR		100	
* If the difference in column 1 is less than zero, enter "0" in column 2 FILL LETY L. THE TOTAL										AL.	<u> </u>	OR	TOTAL	1200	1
,		· (Colu	ımn 1)	MENDE	(0	Column 2)	(Column 3)		SMA	LL I	ENTITY	OR	OTHER SMALL		
AMENDMENT AC		REM	NM\$ NNING TER DMENT		Pf	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDW	Total	. (17	Minus	**	40	= 7		X\$ 8	=		OR	X\$18=	126 00	
AME.	Independent	٠ ,	<u>3</u>	Minus	***	لح ا	E .		X39	_	·	OR	X78=		
	FIRST PRESE	NTATIO	N OF MU	JLTIPLE DE	PENC	DENT CLAIM			.120			OR	+260=		
	+130=													126 m	Pal
		(O-I:			,,			-	יחסמי.			OH,	TOTAL ADDIT. FEE	126	1
AMENDMENT B		REM/	IMN 1) VIMS VINING TER DMENT		Pf	Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	ſ	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
¥Q.	Total	•		Minus	••	•	e .		X\$ 9	=		OR	X\$18=		
HE	Independent	•		Minus	901		=	1	X39	_			X78=		
	FIRST PRESE	OITATIO	N OF MU	JLTIPLE DE	PENC	DENT CLAIM		1				OR			
	•							Į	+130		•	OR	+260=		
								F	OT 1.TICO	TAL		OR	TOTAL ADDIT, FEE		1
			mn 1)	·		Column 2)	(Column 3)								
ENT C		REM/	VIMS VINING TER DMENT		Pf	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
		1			-		J- J	1	X\$ 9	- Ì	ı	OR	X\$18=		1
AMEN	Independent	•		Minus	•••		-		X39				X78=		1
1	FIRST PRESE	NTATIO	N OF MI	JLTIPLE DE	PENC	DENT CLAIM		-		_		OR			ł
	f the entry in colu	ma 1 = 1-	ee than #	a actor to	·				+130			OR	+260=]
	t the Entry in colu If the "Highest Nu If the "Highest Nu The "Highest Num	mber Pre mber Pre	viously Pa viously Pa	Id For IN TH	KS SP/ KS SP	ACE is less the ACE is less the	n 20, enter "20." In 3. enter "3."	•	TO DOM: F	Œ	propriate box	OR k in co	TOTAL ADOIT, FEE Jumn 1.		
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